

PATENT APPLICATION SERIAL NO. **10/518483**

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

12/28/2004 LLANDGRA 00000070 10518483

01 FC:1631	300.00	OP
02 FC:1632	500.00	OP
03 FC:1633	200.00	OP
04 FC:1618	130.00	OP - NO

PTO-1556

(5/87)

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1. Date of Request: _____		2. Serial/Patent # <b>10/518483</b>		
3. Please refund the following fee(s):		4. PAPER NUMBER	5. DATE FILED	6. AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input checked="" type="checkbox"/>	Other			\$ <b>100</b>
		7. TOTAL AMOUNT OF REFUND		\$ <b>100</b>
		8. TO BE REFUNDED BY:		
10. REASON:		<div style="border: 1px solid black; padding: 5px;"> Treasury Check  Credit Deposit A/C #:  <div style="border: 1px solid black; display: inline-block; padding: 2px;"> 05--1323 </div> </div>		
<input checked="" type="checkbox"/>	Overpayment			
<input type="checkbox"/>	Duplicate Payment			
<input type="checkbox"/>	No Fee Due (Explanation):			
11. REFUND REQUESTED BY: <u>W. Alvarado</u>				
TYPED/PRINTED NAME: <u>WINSTON ALVARADO</u>			TITLE: <u>Principal</u>	
SIGNATURE: <u>W. Alvarado</u>			PHONE: <u>703/889-4054 ext. 206</u>	
OFFICE: <u>DO/EO</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____			DATE: <u>05/26/05</u>	

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*